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20 September 1973

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PROJECT HEADQUARTERS  
DIRECTIVE

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U-2 FLYING REQUIREMENTS

1. PURPOSE: To supplement Headquarters Directives as regards U-2 proficiency training
2. RESPONSIBILITY: It is the responsibility of the Director of Operations to insure that all U-2 pilots maintain the degree of proficiency required by Project Headquarters Directive and this Supplement.
3. GENERAL: The following proficiency training guidelines are established as a supplement to Headquarters requirements to insure that all mission pilots maintain a high degree of basic proficiency and a more efficient use of scheduled flying time:
  - A. Desired Proficiency Training items to be accomplished by each mission pilot during each training quarter are:

(1)	Jet Penetrations	- 12
(2)	Non-precision approaches	- 12
(3)	Precision approaches	- 18
(4)	SFO patters	
	(a) with flaps	- 10
	(b) without flaps	- 10
(5)	No flap landings	- 6
  - B. The following restrictions apply to proficiency training items:
    - (1) Proficiency training items may not be accomplished on a sortie after four (4) hours duration, except that one precision or one non-precision approach may be accomplished on a sortie after four (4) hours of flight.
    - (2) Precision and non-precision low approaches will normally not be continued below published minimums. This will provide training in leveloff for actual instrument conditions while adding a safety factor.

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- (3) GCA approaches may be flown during IFR conditions if traffic permits and with tower approval. Exception: If weather is below 1500'/3 miles, only one article is permitted to make multiple approaches at any given time.
  - (4) No-flap landing practice will be accomplished on touch and go landings.
  - (5) Touch and go landings are not permitted under the following conditions:
    - (a) After 4 hours of flight.
    - (b) Total winds in excess of 25 Kts.
    - (c) 0-15 KTS total wind with more than 10 KTS crosswind component.
    - (d) 16-25 KTS total wind with more than 5 KTS crosswind component.
- C. Mission accomplishment forms (MAF) (Attachment 1) will be accomplished for each scheduled flight as follows:
- (1) The Operations section will fill out the "Scheduled" column of the MAF prior to mission briefing.
  - (2) The mission pilot will complete the "Accom" column of the MAF during mission debriefing.
  - (3) The Operations section will insure the information is logged on the appropriate chart.
- D. Operationally Ready ("OR") pilot proficiency requirements are as follows:
- (1) Pilots assigned to this Detachment will be required to demonstrate a high degree of proficiency in all aspects of mission related activities. A pilot showing lack of proficiency in any area, may be removed from Operational Ready status by the Manager [redacted] until subject pilot again demonstrates the proficiency necessary for "OR" Pilot status. The following guidelines, applied against both Operational and Training Missions, will determine when a pilot is to be removed from "OR" Pilot status.

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- (a) Inability to maintain photo flight lines within 3 NM of planned track, unless there are extenuating circumstances, i.e.; weather, systems activity, etc.
  - (b) Consistent failure to operate equipment as briefed.
  - (c) Any other indications of lack of proficiency that could cause degradation of a mission or demonstrate an unsafe trend.
- (2) After a pilot has been placed in "Qualified U-2 Pilot Status" for the above reasons, he will be scheduled for extensive retraining until he again demonstrates the proficiency required of an "OR" Pilot.



Detachment Commander

1 Attachment  
Mission Accomplishment Form

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DATE \_\_\_\_\_

MISSION ACCOMPLISHMENT FORM

PILOT \_\_\_\_\_ MISSION NUMBER \_\_\_\_\_

<u>SCHEDULED</u>	<u>NUMBER</u>	<u>ACCOMPLISHED</u>	<u>REMARKS</u>
HI FLIGHT	_____	_____	_____
HI W/CONFIG	_____	_____	_____
SIM OPS MSN	_____	_____	_____
LO FLIGHT	_____	_____	_____
PENETRATION	_____	_____	_____
PRECISION APCH	_____	_____	_____
NON-PRECISION APCH	_____	_____	_____
SFO WITH FLAPS	_____	_____	_____
SFO WITHOUT FLAPS	_____	_____	_____
NO FLAP LANDING	_____	_____	_____
TOTAL HOURS	_____	_____	_____

Attachment

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